Application Number 830,502 TRANSMITTAL Filing Date October 29, 1999 **FORM** First Named Inventor to be used for all correspondence after initial filing) Francis Barany Group Art Unit 1652 **Examiner Name** R.G. Hutson 19603/2615 (PEFIGE 205 RETITIONS 75 & Exhibits Total Number of Pages in This Submission Attorney Docket Number 1-7 and cited references ENCLOSURES (check all that apply) Fee Transmittal Form After Allowance Communication to Group Assignment Papers (for an Application) Appeal Communication to Board of Fee Attached Appeals and Interferences Drawing(s) Amendment Appeal Communication to Group Declaration and Power of Attorney (Appeal Notice, Brief, Reply Brief) After Final Proprietary Information Licensing-related Papers Status Letter Petition Affidavits/declaration(s) Application Data Sheet Petition to Convert to a Provisional Extension of Time Request Request for Corrected Filing Receipt with Application Enclosures Express Abandonment Request Power of Attorney, Revocation A self-addressed, prepaid postcard for Change of Correspondence Address Information Disclosure Statement acknowledging receipt Terminal Disclaimer Other Enclosure(s) (please identify below): Certified Copy of Priority Request for Refund Exhibits 1-7 Document(s) PTO-1449 (7 pages) CD, Number of CD(s)_ Response to Missing Parts/ 76 Cited references Incomplete Application Statement in Accordance with 37 C.F.R. § A copy of the Notice to Missing Parts 1.821 (1 page) under 37 CFR 1.52 or 1.53 Sequence Listing (36 pages) Computer Readable 3.5" Diskette Containing Sequence Listing Correction of Payment of Deficiency Pursuant to 37 CFR § 1.28(c) Remarks The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Michael L. Goldman, Esq. Nixon Peabody LLP Individual name Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1304 Fax: (585) 263-1600 Registration No. 30,727 Signature Date CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)] I hereby certify that this correspondence is being: deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 ☐ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at

Signature

Typed or printed name

Jo Ann Whalen

R735010.1

FEE TRANSMITTAL **FOR FY 2004**

Patent fees are subject to annual revision.

ш	Applicant	claims small	entity status.	See 37	CFR I	.2
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TOTAL AMOUNT OF PAYMENT (\$) 655

	Conte if Known	
Application Number	09/830,502	1
Filing Date	October 29, 1999	
First Named Inventor	Francis Barany	
Examiner Name	R.G. Hutson	
Art Unit	1652	7
Attorney Docket No.	19603/2615 (CRF D-2	408)

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METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (FINGEIVED					
Check Credit Card Money Other None	3. A	3. ADDITIONAL FEES				
Order Deposit Account:	Large	Large Entity Small Entity		Entity	MAY - 6 2004	
Deposit Account 14-1138	Fee Code	Fee	Fee Code	Fee	Fee D OFFIOE OF PETITIC	ONS
Number 14-1138	1051	(\$) 130	2051	(\$) 65	Surcharge - late filing fee or oath	
	1052	50	2052	25	Surcharge - late provisional filing fee or cover	
Deposit	1053	130	1053	130	sheet Non-English specification	
Account Nixon Peabody LLP	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Name	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner	
The Commissioner is authorized to: (check all that apply)	1				action	
Charge fee(s) indicated below Credit any overpayments	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
Charge any additional fee(s)	1251	110	2251	55	Extension for reply within first month	
- Charge fee(s) indicated below, except for the filing fee	1252	420	2252	210	Extension for reply within second month	420
to the above-identified deposit account.	1253	950	2253	475	Extension for reply within third month	
FEE CALCULATION	1254	1,480	2254	740	Extension for reply within fourth month	
1. BASIC FILING FEE	1255	2,010	2255	1,005	Extension for reply within fifth month	
Large Entity Small Entity Fee Fee Fee Fee Description	1401	330	2401	165	Notice of Appeal	
Code (\$) Code (\$) Fee Paid	1402	330	2402	165	Filing a brief in support of an appeal	
	1403	290	2403	145	Request for oral hearing	
1001 770 2001 385 Utility filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1002 340 2002 170 Design filing fee	1452	110	2452	55	Petition to revive – unavoidable	
1003 530 2003 265 Plant filing fee	1453	1,330	2453	665	Petition to revive - unintentional	
1004 770 2004 385 Reissue filing fee	1501	1,330	2501	665	Utility issue fee (or reissue)	
1005 160 2005 80 Provisional filing fee	1502	480	2502	240	Design issue fee	
SUBTOTAL (1) (S) 0	1503 1460	640 130	2503 1460	320 130	Plant issue fee Petitions to the Commissioner	
SUBIOTAL (I) (S) 0						
2 EVED A CLAIM EEEE EOD HEH HEV AND DELECHE	1807 1806	50 180	1807 1806	50 180	Processing fee under 37 CFR 1.17(q) Submission of Information Disclosure Stmt	100
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from	8021	40	8021	40	Recording each patent assignment per property	180
Extra Claims below Fee Paid			l		(times number of properties)	-
Total Claims $\boxed{4}$ $47**=$ $\boxed{0}$ \boxed{X} $\boxed{18}$ $\boxed{=}$ $\boxed{0}$	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
Independent 3 -7** = 0 X 86 = 0	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
Claims Multiple Dependent X = 0	1801	770	2801	385	Request for Continued Examination (RCE)	
Large Entity Small Entity	1802	900	1802	900	Request for expedited examination of a design	
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)			 		application	\$55
1202 18 2202 9 Claims in excess of 20	Other	fee (specif	fy) Def	iciency Pa	ayment Due Pursuant to 37 CFR § 1.28	\$55
1201 86 2201 43 Independent claims in excess of 3	*Redu	ced by Ba	sic Filin	g Fee Paid	SUBTOTAL (3) (\$) 655	
1203 290 2203 145 Multiple dependent claim, if not paid		(CERTIF	ICATE OF	MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
1204 86 2204 43 ** Reissue independent claims over original patent	I hereby certify that this correspondence is being:					
1205 18 2205 9 ** Reissue claims in excess of 20 and					nited States Postal Service on the date shown below w mail in an envelope addressed to: Commissioner for l	
over original patent					a, VA 22313-1450	, ,
**or number previously paid, if greater, For Reissues, see above	transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703)					
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SUBMITTED BY Complete (if applicable)						
Name (Print/Type) Michael L. Goldman Registration No. (Attorney/Agent) 30,727 Telephone (585) 263-1304					+	
Signature Date						
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May 4,2009						